PHARMACY ORAL EXAMINATION (PRACTICE)

CANDIDATE GUIDE

April 2019

To be eligible for general registration as a pharmacist in Australia, in accordance with section 52 (1)(b) of the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law), an individual must successfully complete any examination or assessment required by an approved registration standard. The Registration standard: Examinations for eligibility for general registration published by the Pharmacy Board of Australia (the Board) states that an individual must successfully complete a written and/or an oral examination in order to demonstrate their competence to practise.

The oral examination (practice) conducted by the Board is an assessment of competence that requires candidates to demonstrate that they can competently apply their knowledge and skills to situations that may be encountered in practice.

This candidate guide has been prepared to inform candidates on the structure and conduct of the oral examination (practice) and to assist them in their preparation for this examination.

To be eligible to undertake the oral examination (practice):

- pharmacy interns must have completed 75% of the 1824 approved supervised practice hours required for general registration by the first scheduled day of the oral examination (practice) period, or
- pharmacists seeking to return to practice must have completed 75% of the supervised practice hours set by the Board, prior to sitting the oral examination (practice)

- pharmacy interns must hold a current pass in the written examination\(^1\) conducted by the Australian Pharmacy Council (APC) at the application closing date for applications for the oral examination (practice). A pass in the written examination is valid for 18 months from the date of passing that examination.

The Pharmacy Board of Australia oral examination (practice) is delivered nationally, in all jurisdictions throughout Australia. The oral examination (practice) was formerly known as the oral examination or oral practice assessment.

\(^{1}\) Further information about the written examination conducted by the Australian Pharmacy Council on behalf of the Board is available at [www.pharmacycouncil.org.au](http://www.pharmacycouncil.org.au).
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Philosophy of the oral examination (practice)

The oral examination (practice) is designed to assess the extent of a candidate's knowledge and his or her ability to use that knowledge by making sound judgments in practice situations. The candidate must be able to consistently demonstrate a clear ability to integrate all of the information about practice situations with appropriate regard for the safety and well-being of the patient.

In the assessment of each practical situation presented to the candidate, consideration is given to the following:

- Has the patient been dealt with in a way that will minimise any potential risk to which he or she may be exposed?
- Has the patient's therapy been optimised? (e.g. Has the patient been supplied with sufficient advice and information to ensure that he or she knows how to take or use the medication effectively?)
- Has the patient been caused any harm by an action, including an omission, or by a decision of the candidate?
- Has the candidate demonstrated their ability to practise legally and professionally?

The Board will therefore consider the candidate's attempt at the examination as a whole, and will record a failure if:

- any individual patient would have been caused serious harm or injury, or
- any individual patient would not have had the potential risk involved with their treatment reasonably minimised and/or their therapy optimised, and/or
- the candidate has failed to practise legally and professionally

In order to demonstrate competence, candidates in the oral examination (practice) are therefore expected to:

- respond appropriately and safely, using sound judgment when presented with a variety of practical situations. These situations may include, but are not limited to:
  - demonstrating reasonable/relevant patient history-taking skills that would assist in decision-making processes when recommending safe and effective treatment options for a patient
  - considering prescriptions presented, with an opportunity to review the patient's medication history and seek further information from the prescriber, patient or agent (which may be presented as community practice and hospital-based situations)
  - responding to drug-information queries
  - responding to over-the-counter requests for advice, possibly associated with concurrent prescription therapy
- demonstrate knowledge of the law that affects pharmacy practice and apply it appropriately to practical situations
- demonstrate a sound knowledge of professional ethics and responsibility, and be able to use professional discretion appropriately, and
- respond to practical situations using communication appropriate to the circumstances.
Competency standards for pharmacy practice

The Board has adopted competency based standards as a framework for the oral examination (practice). These standards are set out in the document *National Competency Standards Framework for Pharmacists in Australia 2016*.

Definitions

<table>
<thead>
<tr>
<th>Competence</th>
<th>Possession by an individual of the required knowledge, skills and attributes sufficient to successfully and consistently perform a specific task or function to the desired standard.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standards</td>
<td>Levels of achievement required for performance to be judged competent.</td>
</tr>
<tr>
<td>Competency</td>
<td>These describe the skills, attitudes and other attributes (including values and beliefs) attained by an individual based on knowledge and experience which together enable the individual to practise effectively as a pharmacist.</td>
</tr>
</tbody>
</table>

The competency standards that may be assessed in the Pharmacy Oral Examination (practice) are outlined in Appendix 1, page 15.

Questions and scenarios are developed to address a broad range of competency standards so that the examiner may assess a candidate’s competence in the setting in which the oral examination (practice) is conducted. For instance, a scenario may require the candidate to do one or more of the following:

1. Upon receipt of a patient medication history consider:
   - concurrent therapy which would need review/monitoring if one drug is ceased
   - possible over or under use
   - possible misuse or abuse
   - the consequences of the involvement of several prescribers
   - appropriateness of dose
   - duplicate prescribing
   - inappropriate prescribing for the apparent diagnosis.

2. Upon receipt of a prescription for a patient, consider whether the prescription:
   - is deficient in some legal requirement
   - calls for an inappropriate dose of a medication
   - is for a medication that interacts with the patient’s other medication, and/or
   - is contraindicated for the patient.

3. Discuss (in the role of the pharmacist) with examiners (in the roles of the patient or agent and the prescriber), a suitable resolution of the problems or issues and provide appropriate counselling to the patient.
Description of the oral examination (practice)

### Conduct

- The oral examination (practice) period may extend over several days or weeks, and candidates are advised by the Australian Health Practitioner Regulation Agency (AHPRA) state/territory offices, of the time and venue they should attend. To ensure equity for all candidates, the alphabetical list of candidates is placed into a random order for attendance.
- At the examination venue, candidates will be asked to wait at a designated point until called before being accompanied to an examination room. Each candidate will be assessed by two examiners. The Board may also appoint an observer to be present for the duration of the oral examination (practice). **The observer does not play a role in the assessment of the candidate.**
- After completing the examination, each candidate is accompanied to a post-examination waiting area and may not discuss their experiences with any other candidate who has not yet taken the examination. A breach of this examination rule places both candidates at risk of disqualification.
- Candidates may bring their own notes and reference books to use in Part 4 of the examination. References may be loaded onto an electronic device such as a computer laptop, however internet use is strictly forbidden. A breach of this examination rule places the candidate at risk of disqualification.

### Structure

- The examination consists of a range of standardised and validated questions and practice-based scenarios designed to test a range of competencies. As registration in Australia does not limit where a pharmacist may practise, candidates must be familiar with the competencies required to practise in both community and hospital contexts irrespective of where they have undertaken their supervised practice.
- In this examination, candidates are required to demonstrate competence through a sound knowledge base, the ability to apply their knowledge to the practice situation, the ability to solve practice-based problems, and the ability to effectively communicate in fluent English in a way that other health care professionals and consumers can understand.
- The oral examination (practice) consists of the following four parts:
  - Part 1: Medication Knowledge and Counselling (10 mins)
  - Part 2: Primary Healthcare (10 mins)
  - Part 3: Legal and Ethical Practice (5 mins)
  - Part 4: Problem Solving & Communication (20 mins)
- The time taken to conduct the examination is 45 minutes. Examiners realise that candidates may be nervous, and will attempt to put candidates at their ease. Candidates should try to be relaxed and demonstrate their competence in a calm and confident manner.
- In the situations presented, consideration such as dose, interactions, indications, side effects, legal aspects, counselling points etc are expected to be known. To assess a candidate as competent, examiners must be satisfied that the candidate has a good grasp of practical and legal matters, that he or she can demonstrate sound professional judgment in dealing with common practical situations, and that he or she would be able to practise with care and prudence.
- Candidates should expect examiners to remain neutral regarding the quality of their answers. Candidates are advised that examiners will not indicate whether the question or situation has been competently dealt with.
- Candidates are advised to read widely in preparation for the examination, including professional journals, bulletins and other source material of topical importance. Pharmacy interns are required to participate fully in a Board approved pharmacy intern training program and are encouraged to attend as many relevant continuing education activities as possible.
### Structure of the oral examination (practice)

#### Part 1

<table>
<thead>
<tr>
<th>Medication Knowledge and Counselling</th>
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<tbody>
<tr>
<td>This part is not conducted in role play. The candidate is given a list of medications and is expected to discuss and demonstrate reasonable knowledge of each of the medications listed when dispensing and counselling.</td>
</tr>
<tr>
<td>This should include the drug class, indications for use, dosage range, frequency and best time for administration (where relevant), patient counselling points, and suitable monitoring (such as - for efficacy or patient safety) (e.g. what the patient needs to be alert for, laboratory testing required etc.)</td>
</tr>
<tr>
<td>No references are permitted for this part.</td>
</tr>
</tbody>
</table>

#### Part 2

<table>
<thead>
<tr>
<th>Primary Healthcare</th>
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<tbody>
<tr>
<td>This part is conducted in role play and discussion.</td>
</tr>
<tr>
<td>The candidate is presented with a primary health care scenario (e.g. pain, rash, eye problem etc). The candidate is expected to elicit relevant patient information through appropriate history-taking to deliver reasonable primary health care. In addition the candidate is expected to demonstrate knowledge about the health condition (which may include correct identification of the condition).</td>
</tr>
<tr>
<td>Appropriate management with justification is required. This may include</td>
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<tr>
<td>- OTC treatments</td>
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<td>- lifestyle modifications or</td>
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<tr>
<td>- referral to another health care practitioner</td>
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<tr>
<td>Examiners will also assess the candidates for their ability to:</td>
</tr>
<tr>
<td>- structure a relevant patient/agent medical/medication history interview based on the primary health care scenario presented</td>
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<tr>
<td>- apply communication skills to obtain correct information and deliver appropriate advice</td>
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<tr>
<td>- establish rapport with the patient/agent</td>
</tr>
<tr>
<td>- use language appropriate to the person in role play</td>
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<tr>
<td>- respond appropriately to the needs of the patient/agent during role play</td>
</tr>
<tr>
<td>No references are permitted for this part.</td>
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</table>

#### Part 3

<table>
<thead>
<tr>
<th>Legal and Ethical Practice</th>
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<tr>
<td>This part is conducted as general discussion. The candidate is presented with a scenario (e.g. suspected forged prescription, oral instructions from a prescriber, a dispensing error etc), and is expected to discuss the potential relevant legal and/or ethical issues, and action to be taken to produce a legal and satisfactory outcome for the patient/client or situation described. In addition, the candidate may be asked how this situation could possibly be prevented again.</td>
</tr>
<tr>
<td>In this section, examiners will also assess the candidates for their:</td>
</tr>
<tr>
<td>- knowledge of ethical and legal aspects (factual knowledge) and application of knowledge</td>
</tr>
<tr>
<td>- proficiency of decision making - actions taken and reasons why</td>
</tr>
<tr>
<td>- communication including clear explanation of issues, justifications for actions, etc.</td>
</tr>
<tr>
<td>No references are permitted for this part.</td>
</tr>
</tbody>
</table>
Problem Solving and Communication

This part is conducted in role play (e.g. with the patient/agent, prescriber/s). The candidate is given a prescription and the pharmacy’s own patient dispensary medication history, and is expected to elicit other relevant information through appropriate patient history-taking. A problem or main issue may exist, including but not limited to:

- drug/drug interaction
- contraindication
- inappropriate drug or dose
- 'doubling up'
- change in dose
- change in medication
- other prescribers involved
- drug-induced illness
- careful monitoring is required
- no problem, etc.

References are permitted in this part subject to conditions/restrictions specified in the oral examination (practice) rules (see examination rules 5 and 6). The candidate is expected to communicate appropriately with the patient/agent and their health practitioner/s to reach a satisfactory patient outcome.

Examiners will also assess candidates for their:

- medication factual knowledge
- application of knowledge to practice situations
- proficiency of decision making
- communication skills (taking a reasonable patient history in order to determine potential medication or medical condition issues, listening skills to extract relevant information, rapport and clear and appropriate language used when communicating with patient/agent and health practitioner/s)
Eligibility to undertake the oral examination (practice)

To be eligible to undertake the oral examination (practice):

- pharmacy interns:
  - must have completed 75% of the 1824 approved supervised practice hours required for general registration by the first scheduled day of the oral examination (practice) period, and
  - must hold a current pass in the written examination conducted by the Australian Pharmacy Council (APC) at the closing date for applications for the oral examination (practice). A pass in the written examination is valid for 18 months from the date of passing that examination.

- pharmacists seeking to return to practice must have completed 75% of the supervised practice hours set by the Board, prior to sitting the oral examination (practice).

Pharmacy interns are advised to give careful consideration to their ability to accumulate supervised practice hours to meet the eligibility criteria prior to the scheduled examinations. Failure to accumulate sufficient supervised practice hours for reasons such as delaying commencement of supervised practice or taking annual or study leave may prevent a candidate from meeting the eligibility criteria for entry to a scheduled examination. Ineligible candidates will be required to undertake a subsequent examination when they meet the eligibility criteria.

Application to be a candidate

The Board conducts the oral examination (practice) for pharmacy interns on three occasions each year (refer to the Pharmacy Board of Australia Schedule of Oral Examinations). Candidates must apply to sit the oral examination (practice) in the jurisdiction where they undertook their supervised practice. Pharmacy interns should lodge an Application for a pharmacy intern to be a candidate for an oral examination (practice) by the application closing date, as detailed on the Schedule of Oral Examinations. Late applications will not be accepted.

In order to apply to sit the oral examination (practice), returning to practice pharmacists should lodge an Application for oral examination (practice) or oral examination (pharmacy law and ethics).

Following acceptance of the candidate’s application, the examination candidate timetable detailing the time and place of their examination will be forwarded by post or email two weeks before the commencement of the examination period. Candidates are reminded that AHPRA must have correct details of their postal address and other contact details at all times.

Results

Oral examination (practice) results for interns are ratified by the Board or its delegate. This may occur some days after an individual’s examination took place. No results can be released until the results have been ratified.

Candidates will be advised at their examination of the date that results will be issued. All candidates are notified of their results in writing. Results will not be given by telephone. AHPRA offices are not to be contacted with queries regarding the early release of results.

Unsuccessful candidates will be invited to attend an examination review meeting at a time determined by the examination officer, to review their performance. Attendance is strongly encouraged so that candidates gain an understanding of why they were unsuccessful in the examination and learn ways to improve their performance at their next attempt.
Preparing for the oral examination (practice)

With reasonable preparation and accumulation of experience of practical situations during supervised practice, candidates should be able to demonstrate the required level of competence at their first attempt at the oral examination (practice). Candidates are reminded to use training plans, undertake CPD activities, make use of practical situations (learn, experience, reflect, observe) to ensure adequate preparation for the oral examination and enhance their practice for future general registration as a pharmacist. This may identify learning gaps, improve confidence and performance in areas of factual knowledge, application to practical situations, proficiency in decision making, and communication which are assessed throughout the oral examination. This is the final assessment before being eligible to apply for general registration. Once general registration is granted new registrants are able to practise unsupervised.

The oral examination (practice) is different to an academic examination at which a pass is possible by achieving only the base pass mark. The oral examination (practice) is used to determine whether a candidate is competent to practise as a pharmacist and therefore the Board expects this competence to be clearly demonstrated in all components of the examination, in order that the public of Australia can be assured of the competency of all new registrants.

Candidates are advised to have the widest possible practical experience by seeking experience in areas other than their regular practical training area when at all possible. This advice particularly applies to pharmacy interns undertaking a significant proportion of their supervised practice at a pharmaceutical manufacturing unit, or in a teaching or research institution.

Practical advice for preparation may also include quizzesing yourself on medications you are about to dispense (e.g. on dosage range and frequency, indication, counselling points), role-playing primary health care scenarios including taking a relevant and reasonable patient history with a colleague, time keeping (practising questions under examination conditions), handling prescription problems (or observing others handling prescription problems), reviewing your own performance – how clear is your counselling, communicating (e.g. listening, speaking)? etc.

Candidates may consider seeking advice from a health professional, prior to the examinations, if they are prone to extreme nervousness etc.

Examination day – in the examination room

In the examination room two examiners will introduce themselves and conduct your assessment. The examiners will provide instructions, make notes based on your response to examination material and monitor time. Candidates should also be wary of timing for each question to ensure they cover aspects of each question adequately. As each part of the examination is introduced, a question sheet will be provided for you to view so you are clear on what is required of you. An observer may also be present.

Paper and pen will be provided for candidates to make notes during the question, if required as mentioned in rule 5, and will be destroyed afterwards. Electronic devices cannot be used for note taking.

Candidates will be asked to start their computer and leave it aside until Part 4. Wifi or internet connection must be turned off and will be checked by examiners. References are to be placed aside until Part 4.

Sections will not be revisited once a question/section/part has been completed.

Upon conclusion of the examination, candidates will be instructed to collect their own references and belongings.

Depending on the examination time, candidates may be directed to the post-examination waiting area or quarantine room.
Oral examination (practice) rules

The following examination rules are issued by the Pharmacy Board of Australia. These rules should be read in conjunction with the Board’s Registration standard: Examinations for eligibility for general registration.

The rules for the oral examination (practice) are as follows:

1. In order to be granted entry to the oral examination (practice), candidates are required to:
   - for pharmacy interns:
     - have completed 75% of their 1824 approved supervised practice hours by the first scheduled day of the oral examination (practice) period, and
     - must hold a current pass in the written examination conducted by the Australian Pharmacy Council (APC) at the closing date for applications for the oral examination (practice). A pass in the written examination is valid for 18 months from the date of passing that examination.
   - for recency of practice pharmacists, have completed 75% of the supervised practice hours set by the Board, prior to sitting the oral examination (practice).

2. Candidates may lodge one application per oral examination (practice) period, and only in the jurisdiction where they undertook their supervised practice.

3. Pharmacy interns are required to pay the application fee for the oral examination (practice) by the application closing date. Failure to pay in full will result in your application not being considered and refusal into the oral examination (practice).

4. Candidates presenting to the oral examination (practice) who are waiting to be examined, and candidates who have completed the examination, must not communicate with one another on the day of the examination.

5. Candidates may bring into the examination room any reference material (electronic or hard copy) of their choice, which may be referred to when directed by an examiner. However, no extra examination time will be awarded to candidates for this purpose. References may contain personal annotations or marks. Electronic reference devices must be set to English language setting prior to attending the examination centre otherwise they may not be used during the examination. The Board will not provide references for the candidate’s use. Candidates should note that no assistance will be provided in the transportation of their chosen reference material to examination rooms. Candidates will be provided pen and paper to make notes during the examination which will be retained by the examiners at the end of the examination. Examiners will not use these notes in their assessment of the candidate. Electronic devices cannot be used by candidates for the purpose of note taking.

6. Candidates are prohibited from communicating externally which includes the use of devices during the whole of the examination (including pre- and post-examination waiting areas). Any electronic device used for the open book section (Part 4) such as lap top computers or tablets, must have cellular, wifi or internet capabilities disabled. Examiners and examination staff shall have the right to inspect any electronic device during the examination at any time to ensure no external communication is being sent or received. Any device that is capable of recording (video / sound) must not be used to do so. The following devices are prohibited from use during the examination: smartphones, MP3 players, other “smart” accessories such as watches, glasses, or other wearable technology. Candidates must ensure that references used for the open book section (Part 4) of the examination do not rely on internet connectivity.

7. Candidates must abide by quarantine times and can only leave the examination or pre- and post-examination waiting areas when approved to do so by examination officers.

8. After the conclusion of the examination, any communication regarding examinations must be addressed to the AHPRA examination officer. Candidates must not communicate with examiners or members of the Board or the Board’s committees concerning the examination.

9. Failure to comply with any rule or instruction by an examiner or supervisor will be regarded as a breach of discipline and may lead to exclusion from the examination and the candidate deemed to have failed.

10. All results will be notified to candidates in writing. Results will not be given via the telephone.

11. Eligible candidates who are unable to attend the exam due to exceptional circumstances beyond their control can apply for special consideration in accordance with the following special consideration procedures.
Requests for special consideration

There are two types of special consideration available to candidates.

1. Special arrangements

Due to the candidate’s circumstances, special arrangements may be required to undertake the oral examination (practice). Examples include personal circumstances around a medical condition that require the oral examination (practice) to be performed under a different set of conditions or at a time outside the schedule of examinations.

Candidates are to make a formal request for special arrangements at the time of applying for the oral examination (practice), or as soon as practicable once a need is identified. Additional documentation e.g. medical certificate should be provided to assist the Board in making its decision. The request will be referred to the Board’s Registration and Examinations Committee for consideration.

Candidates should provide maximum notice for their requests to be reasonably assessed and accommodated where special consideration is granted. This will also enable candidates to be notified of the outcome of their application prior to the day of their scheduled examination.

2. Inability to attend a scheduled examination due to an adverse event

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Candidates who were unable to attend an examination due to exceptional circumstances beyond their control may be given an opportunity to complete an examination under different arrangements. Note: If a candidate is unable to attend their scheduled oral examination due to an adverse event and submits reasonable evidence e.g. medical report, statutory declaration etc, and requests to sit during the usual scheduled examination times (February, June, October), this is not classified as special consideration and the request will be handled by AHPRA.</th>
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</thead>
</table>
| Eligibility | Only those candidates who can demonstrate that they have reasons beyond their control are eligible for special consideration. These reasons are:  
• acute illness (eg. hospital admission, onset of serious illness)  
• loss or bereavement (eg. death of close family member)  
• hardship or trauma (eg. victim of crime, severe disruption to domestic life)  
• unforeseen call-up for service (eg. military service, Jury service, emergency service).  
Candidates who attempt or complete an examination are not eligible to apply for special consideration. |
| Procedure | Applications will only be accepted from eligible candidates  
Applications must:  
• be submitted prior to or no later than 2 business days after the date of the scheduled examination  
• be lodged in writing  
• include relevant documentary evidence of the exceptional circumstances beyond the control of the candidate, eg:  
  o medical certificate which explicitly states that the candidate was not fit to undertake the pharmacy oral examination (practice) on the specified date  
  o death certificate  
  o police report  
  o statutory declaration  
  o notification of jury service, military service, emergency service  
• be submitted to the relevant AHPRA examination officer.  
Applications for special consideration are considered by the Board’s Registration and Examinations Committee. The decision reached by this committee is final.  
Failure to follow the special consideration application procedure may result in the
application not being accepted.

If a request for special consideration is approved, the alternative arrangements offered will depend on the time available. Where possible, the APHRA examination officer may arrange an alternative time during the current examination period. Alternatively the candidate may prefer to undertake the examination in the next scheduled examination period published on the Board’s website.

Possible Outcomes

- Applications will not be approved unless there are exceptional circumstances beyond the control of the candidate.
- If approved, the special consideration may consist of:
  - rescheduling of the examination within the current examination period
  - a time extension during the examination
  - other arrangements for undertaking the examination.

Under no circumstances will special consideration lead to an adjustment of an examination result.
Oral examination (practice) appeals

A candidate who believes they have cause to appeal in relation to the conduct or outcome of the oral examination (practice) can lodge an *Oral examination (practice) appeal application form* (available from the examination officer in the candidate’s jurisdiction), with payment of the required internal review appeal fee. The application must include supporting documentation, be addressed to the AHPRA examination officer, and be received no later than 7 days following the candidate’s examination review meeting. If a candidate does not attend an examination review meeting, an appeal must be lodged within 4 weeks from the date of the letter advising of their examination result.

An appeal can be lodged based on the following grounds:

- the candidate believes that their performance was impaired as a result of a deficiency or error in the examination process, or
- the candidate believes that there was unfairness in the conduct of the examination.

Satisfactory documentation must be provided by an applicant in support of an appeal, outlining the grounds for appeal. With the lodgment of an *Oral examination (practice) appeal application form*, the candidate confirms his or her consent to relevant documentation being released to the Board’s Registration and Examinations Committee and, if necessary, to the members of an external review panel.

The appeals procedure is not a means of circumventing the Board’s usual examination process.

Except in limited circumstances, a successful appeal will not lead to an examination result being altered. Where an appeal is upheld, it may result in the examination or any of its components being set aside with a new examination ordered to examine the component(s) in dispute.

The appeals procedure is initiated by lodging a completed application form and may involve:

**Internal Review**

The internal review is carried out by the Board’s Registration and Examinations Committee, the purpose of which is to identify whether any administrative or procedural error occurred. The Committee may call for further material from the candidate and/or the original examiners.

The internal review will be completed within 15 business days of receipt of an appeal being lodged. If the appeal is upheld then the Registration and Examinations Committee will make a decision on further action to be taken and advise the candidate in writing.

In the event that an error in the examination process is not identified by the internal review, the AHPRA examination officer will be available to explain to the candidate the basis of the Registration and Examinations Committee’s finding. The intention is to assist the candidate to understand the examination process and what transpired at the internal review so that an informed decision can be made about whether to progress to the external review stage.

**External Review**

If a candidate is dissatisfied with the findings of the internal review, the candidate may apply to the Board for an external review by lodging an *Oral examination (practice) appeal application form*, and pay the required external review appeal fee. Applications for an external appeal must be received by AHPRA within 7 days of the date of the letter advising of the outcome of the internal appeal. The external review will be completed within 60 days of the initial oral examination (practice) appeal application.

An external review panel appointed by the Board will conduct a review of the matter. The panel will comprise 3 persons, none of whom were previously involved in the initial examination of the candidate, the examination review meeting or the
internal review instigated by the appeal.

The panel may conduct the review in a manner it considers appropriate and may call for further material from the candidate, the Registration and Examinations Committee, and/or the candidate’s original examiners.

If the external review finds in favour of the candidate, it may recommend to the Board that:

1. the result of the examination or any of its components be set aside and order a new examination to replace the component(s) in dispute, or
2. the Board makes any other decision appropriate within the limits of the established procedures for the examination process.

Matters before the external review panel will be decided by majority vote.

The decision of the external review panel is final and the candidate will be notified in writing of the decision and the reasons for that decision.

The Board recognises the right of candidates to have their personal information protected and made accessible to them. AHPRA’s Privacy Statement will be complied with.

Candidates can be assured that, unless authorised by law, personal information (i.e. information that directly or indirectly identifies the candidate) will not be disclosed to persons other than to members of the Registration and Examinations Committee or an external review panel and will only be used for the purposes related to the appeal.
Appendix 1: Competency Standards relevant to the Pharmacy Oral Examination (practice)
(Adapted from the National Competency Standards Framework for Pharmacists in Australia (2016))

The table below outlines the competency standards from the 2016 Framework that may be assessed in each part of the Pharmacy oral examination (practice) and evidence examples that may be sought by examiners when assessing competence of candidates.

<table>
<thead>
<tr>
<th>Structure of the oral examination (practice)</th>
<th>Relevant domain, competency standards &amp; enabling competencies from the 2016 Framework</th>
<th>Evidence examples sought by examiners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 1</td>
<td>Domain 3: Medicines Management and Patient Care Standard 3.2: Implement the medication management strategy or plan Enabling competencies: • provide counselling and information for safe and effective medication management.</td>
<td>The candidate stated: • drug class • indications for use • dosage range • frequency and best time for administration (where relevant) • patient counselling points, and • suitable monitoring e.g. what the patient needs to be alerted about, laboratory testing required etc.</td>
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<tr>
<td>Medication Knowledge and Counselling (10 mins)</td>
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<tr>
<td>Structure of the oral examination (practice)</td>
<td>Relevant domain, competency standards &amp; enabling competencies from the 2016 Framework</td>
<td>Evidence examples sought by examiners</td>
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<tr>
<td>Part 2</td>
<td>Domain 3: Medicines Management and Patient Care</td>
<td>The candidate:</td>
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<tr>
<td>Primary Health Care (10 mins)</td>
<td>Standard 3.1: Develop a patient-centred, culturally responsive approach to medication management</td>
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<td>The candidate is presented with a primary health care scenario e.g. pain, rash, eye problem etc.</td>
<td>Enabling competencies:</td>
<td>• obtained a patient history and relevant information e.g. symptoms, current medication treatments including any complementary or OTC medicines, clinical circumstances such as pregnancy, breastfeeding, infant, referral symptoms</td>
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<tr>
<td>The candidate is expected to elicit relevant patient information through appropriate history-taking to deliver reasonable primary health care. In addition, the candidate is expected to demonstrate knowledge about the health condition (which may include correct identification of the condition).</td>
<td>Standard 3.2: Implement the medication management strategy or plan</td>
<td>• provided appropriate treatment considering presenting signs and symptoms, considering safety and effectiveness</td>
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<td></td>
<td>Enabling competencies:</td>
<td>• referred patient to services that may assist or support selfcare</td>
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<td></td>
<td>• obtain relevant health and medicines information</td>
<td>• provided advice to promote healthy lifestyle and reduce risk of disease</td>
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<td></td>
<td>• assess medications management practices and need</td>
<td>• actively listened in an empathic manner, responded to issues</td>
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<td>Standard 3.6: Promote health and well-being</td>
<td>• used clear and concise language to provide information</td>
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<td>Enabling competencies:</td>
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<tr>
<td></td>
<td>• assist development of health literacy</td>
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<td></td>
<td>• support health promotion activities and health services</td>
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<td>• intended to maintain and improve health</td>
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<td>• support evidence-based public health programs</td>
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<td>Domain 2: Communication and collaboration</td>
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<td>Standard 2.3: Communicate effectively</td>
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<td></td>
<td>Enabling competencies</td>
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<td></td>
<td>• use appropriate communication skills</td>
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<td></td>
<td>• confirm effectiveness of communication</td>
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<td>Part 3</td>
<td>Domain 1: Professionalism and Ethics</td>
<td>The candidate:</td>
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<tr>
<td>Legal and Ethical Practice</td>
<td>Standard 1.1 Uphold professionalism in practice</td>
<td>• responded appropriately to unreasonable circumstances, requests or demands considered likely to compromise professional rights, standards or conventions</td>
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<td>(5 mins)</td>
<td>Enabling competencies:</td>
<td>• used professional autonomy and judgement to respond to presenting circumstances</td>
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<td>• uphold the professional role of a pharmacist</td>
<td>• applied sound ethical standards in the conduct of professional practice</td>
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<td>• accept professional responsibility and accountability</td>
<td>• identified ethical dilemmas in practice and identified a course of action appropriate to the specific situation.</td>
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<td>Standard 1.2 Observe and promote ethical standards</td>
<td>• developed a clear view of the nature of the presenting circumstances and possible options for responding</td>
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<td>Enabling competencies:</td>
<td>• accepted responsibility for deciding the course of action and applied required knowledge and skills to address routine practice situations</td>
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<td>• support ethical professional practice</td>
<td>• used relevant legislative instruments, professional codes and guidelines and operational policies and procedures to support decision making in routine practice situations</td>
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<td>• manage ethical issues arising in practice</td>
<td>• took corrective action promptly to address sources of risk or harm and used follow up processes.</td>
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<td>• promote ethical professional practice</td>
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</table>
| Part 4 Problem Solving and Communication (20 mins) | Domain 3: Medicines Management and Patient Care  
Standard 3.1: Develop a patient-centred, culturally responsive approach to medication management  
Enabling competencies:  
- obtain relevant health and medicines information  
- assess medications management practices and needs  
- collaborate to develop a medication management strategy or plan  
Standard 3.2: Implement the medication management strategy or plan  
Enabling competencies:  
- Dispense medicines (including compounded medicines) in consultation with the patient and/or prescriber  
- provide counselling and information for safe and effective medication management  
Domain 2: Communication and collaboration  
Standard 2.3: Communicate effectively  
Enabling competencies:  
- use appropriate communication skills  
- confirm the effectiveness of communication  
Standard 2.4: Apply interpersonal communication skills to address problems  
Enabling competencies:  
- analyse the problem or issue to be addressed and the possible solutions | The candidate:  
- Interviewed the patient to elicit relevant personal information, health information, details of current medication treatment including any complementary and alternative medicines  
- enquired about medication management, identified situations warranting particular care e.g. pregnancy, breastfeeding or potentially serious symptom or sign  
- used their understanding of sources of actual or potential medication related problems or issues e.g. allergies, comorbidities, efficacy, interactions etc that may impact on safety and efficacy  
- liaised with patient, prescriber etc. to agree roles, therapeutic goals  
- provided information and clear explanations to assist the patient to understand therapeutic goals and medication management options  
- checked patient’s understanding of desired medication management through listening and questioning  
- elicited information on changes in patient’s condition or symptoms  
- made or recommended a change in medication management where adverse effects are thought to be associated with medication treatment  
- used clear and concise language to provide information in written or verbal form  
- considered a range of options when determining a course of action for addressing an identified issue  
- used assertive or persuasive communication when seeking a negotiated outcome  
- justified preferred approach in terms of likely success compared to other options  
- contributed to professional issues by applying expertise in medicines action and uses across the medicines management pathway  
- engaged with patients to promote the judicious,
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| condition issues, listening skills to extract relevant information, rapport and clear and appropriate language used when communicating with patient/agent and health practitioner/s | • engage with others as appropriate to resolve the identified problem or issue  
Domain 1: Professionalism and Ethics  
Standard 1.1: Uphold professionalism in practice  
Enabling competencies:  
• promote a culture of professionalism  
• uphold the professional role of the pharmacist  
• apply understanding and knowledge of medicines management and use in society  
Standard 1.3: Practise within applicable legal framework  
Enabling competencies:  
• comply with statute law, guidelines, codes and standards  
Standard 1.5: Apply expertise in professional practice  
Enabling competencies:  
• apply expert knowledge and skills  
• use reasoning and judgement | appropriate, safe and effective use of medicines  
• took corrective action promptly to address sources of risk or harm and used relevant follow up processes. |

**Note:** Competencies from the following Domains are regarded as outside the scope of the Pharmacy Oral Examination:

- 4. Leadership and Management, and
- 5. Education and Research.